



Attorney Docket No. 3900-0217PUS1

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE:  
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P.O. Box 747 • Falls Church, Virginia 22040-0747  
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

### COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title: **HEAT RELEASEABLE WAFER DICING TAPE**

the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:

Fill in Appropriate Information - The specification was filed on 12/15/2005 as United States Application Number                   ;

and amended on                    (if applicable) and/or

For Use Without Specification Attached: the specification was filed on 11/17/2003 as PCT International Application Number PCT/US03/36559;

and was amended on                    (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

#### Prior Foreign Application(s)

Insert Foreign Information (if appropriate)	Priority Claimed				
	(Number)	(Country)	(Month/Day/Year Filed)	Yes	No
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.

Insert Provisional Application(s): (if any)	(Application Number)	(Filing Date)	
	(Application Number)	(Filing Date)	

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application

Insert Requested Information (if appropriate)	Country	Application Number	Date of Filing (Month/Day/Year)
	United States of America	60/479,179	June 18, 2003

I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT applications(s), including the continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Insert Information Application(s): (if any)	Application Number	(Filing Date)	(Status - patented, pending, abandoned, etc.)
	(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

**CUSTOMER NO. 02292; (BIRCH, STEWART, KOLASCH & BIRCH, LLP)**  
 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

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 ↓

Full Name of First  
 or Sole Inventor  
 Inventor Name of  
 Inventor →  
 Inventor Date This  
 Document is Signed

Inventor Residency

Inventor Post Office  
 Address →

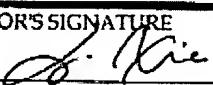
Full Name of Second  
 Inventor, if any;  
 see above

Full Name of Third  
 Inventor, if any;  
 see above

Full Name of Fourth  
 Inventor, if any;  
 see above

Full Name of Fifth  
 Inventor, if any;  
 see above

Full Name of Sixth  
 Inventor, if any;  
 see above

GIVEN NAME/FAMILY NAME Wilson XIA		INVENTOR'S SIGNATURE 	DATE* 5/16/2006
Residence (City, State & Country) York, Pennsylvania		CITIZENSHIP Singapore	
MAILING ADDRESS (Complete Street Address including City, State & Country) 20 Bridlewood Way; York, Pennsylvania 17402			
GIVEN NAME/FAMILY NAME Deepak HARIHARAN		INVENTOR'S SIGNATURE 	DATE* 2-24-06
Residence (City, State & Country) York, Pennsylvania		CITIZENSHIP US	
MAILING ADDRESS (Complete Street Address including City, State & Country) 65 Governors Place at Waterford; York, Pennsylvania 17402			
GIVEN NAME/FAMILY NAME Joel BARTON		INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Wellsville, Pennsylvania		CITIZENSHIP US	
MAILING ADDRESS (Complete Street Address including City, State & Country) 240 Nursery Road; Wellsville, Pennsylvania 17365			
GIVEN NAME/FAMILY NAME		INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State & Country)			
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\*DATE OF SIGNATURE

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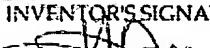
I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First Inventor, or Sole Inventor: Inventor Name of Inventor: Inventor Date: This Document is Signed  Inventor First Name:  Inventor Post Office Address:  Full Name of Second Inventor, if any; see above		GIVEN NAME/FAMILY NAME Wilson XIA	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) York, Pennsylvania		CITIZENSHIP Singapore		
MAILING ADDRESS (Complete Street Address including City, State & Country) 20 Bridlewood Way; York, Pennsylvania 17402				
GIVEN NAME/FAMILY NAME Deepak HARIHARAN		INVENTOR'S SIGNATURE 	DATE* 2-28-06	
Residence (City, State & Country) York, Pennsylvania		CITIZENSHIP US		
MAILING ADDRESS (Complete Street Address including City, State & Country) 65 Governors Place at Waterford; York, Pennsylvania 17402				
GIVEN NAME/FAMILY NAME Joel BARTON		INVENTOR'S SIGNATURE	DATE*	
Residence (City, State & Country) Wellsville, Pennsylvania		CITIZENSHIP US		
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Residence (City, State & Country)		CITIZENSHIP		
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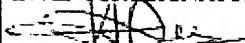
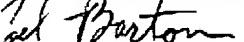
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Full Name of First or Sole Inventor Inventor Name of Inventor Inventor Date This Document is Signed  Inventor Residence  Inventor Post Office Address  Full Name of Second Inventor, if any; see above	GIVEN NAME/FAMILY NAME Wilson XIA	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) York, Pennsylvania	CITIZENSHIP Singapore	
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Full Name of Third Inventor, if any; see above	GIVEN NAME/FAMILY NAME Deepak HARIHARAN	INVENTOR'S SIGNATURE 	DATE* 2-28-06
	Residence (City, State & Country) York, Pennsylvania	CITIZENSHIP US	
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Full Name of Fourth Inventor, if any; see above	GIVEN NAME/FAMILY NAME Joel BARTON	INVENTOR'S SIGNATURE 	DATE* 5-13-06
	Residence (City, State & Country) Wellsville, Pennsylvania	CITIZENSHIP US	
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Full Name of Fifth Inventor, if any; see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country)	CITIZENSHIP	
	MAILING ADDRESS (Complete Street Address including City, State & Country)		
Full Name of Sixth Inventor, if any; see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country)	CITIZENSHIP	
	MAILING ADDRESS (Complete Street Address including City, State & Country)		

\*DATE OF SIGNATURE